Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Provider Number	Hospital Name	Address 1
250128	TRI LAKES MEDICAL CENTER	303 MEDICAL CENTER DRIVE

Page 1 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



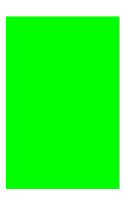
BATESVILLE PANOLA

Page 2 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of Surgery Patients given an antibiotic at the right time (within one hour before surgery) to help prevent infection

17%



Page 3 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



12 The number of cases is too small to be sure how well a hospital is performing

Page 4 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of Surgery Patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery)

71%



Based on Hospital Process of Care Measures – Surgical Care Improvement Project



7 The number of cases is too small to be sure how well a hospital is performing

Page 6 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of Surgery Patients who were given the right kind of antibiotic to help prevent infection

86%



Page 7 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



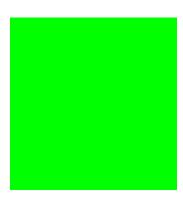
7 The number of cases is too small to be sure how well a hospital is performing

Page 8 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of Surgery Patients who got treatment at right time (within 24 hours before or after surgery) to help prevent blood clot

25%



Page 9 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



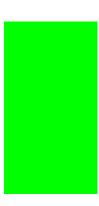
4 The number of cases is too small to be sure how well a hospital is performing

Page 10 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of Surgery Patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries

14%



Page 11 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



7 The number of cases is too small to be sure how well a hospital is performing

Page 12 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of all Heart Surgery Patients whose blood sugar is kept under good control in the days right after surgery

N/A

Page 13 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



0

Page 14 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Percent of Surgery Patients needing hair removed from the surgical area before surgery who had hair removed using a safer method

100%

Page 15 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

Based on Hospital Process of Care Measures – Surgical Care Improvement P	roject	
Number of Patients-8	Footnote-8	Percent of Surgery Patients whose urinary catheters were removed on the first or second day after surgery
17	The number of cases is too small to be sure how well a hospital is performing	100%

Page 16 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Number of Patients 11	Footnote 11	Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on them	Number of Patients 8	Footnote 8	Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery (higher numbers are better)
1	The number of cases is too small to be sure how well a hospital is performing	0%	1	The number of cases is too small to be sure how well a hospital is performing	0%

Page 17 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Number of Patients 9	Footnote 9	Outpatients having surgery who got the right kind of antibiotic (higher numbers are better)	Number of Patients 10	Footnote 10
1	Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.), The number of cases is too small to be sure how well a hospital is performing	N/A	0	Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.

Page 18 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

	•	
250042	NW MISSISSIPPI REGIONAL MED CENTER	1970 HOSPITAL DRIVE
250012	ALLIANCE HEALTHCARE SYSTEM	1430 EAST SALEM
250006	BAPTIST MEMORIAL HOSPITAL UNION COUNTY	200 HWY 30 WEST
250034	BAPTIST MEMORIAL HOSPITAL NORTH MS	2301 SOUTH LAMAR
250010	TIPPAH COUNTY HOSPITAL	1005 HWY 15 N

Page 19 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

CLARKSDALE	COAHOMA	
HOLLY SPRINGS	MARSHALL	

NEW ALBANY	UNION	

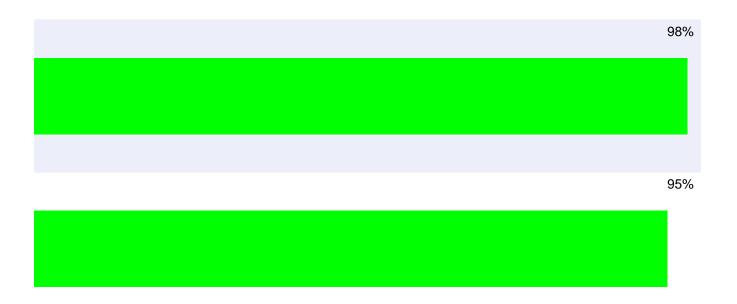
OXFORD LAFAYETTE

RIPLEY	TIPPAH	

Page 20 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project





N/A

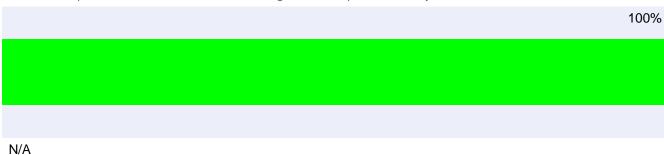
Page 21 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
	109		
N/A		No data is available from the hospital for this measure	
	123	The hospital indicated that the data submitted for this measure were based on a sample of cases	
	387	The hospital indicated that the data submitted for this measure were based on a sample of cases	
N/A		No data is available from the hospital for this measure	

Page 22 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project







N/A

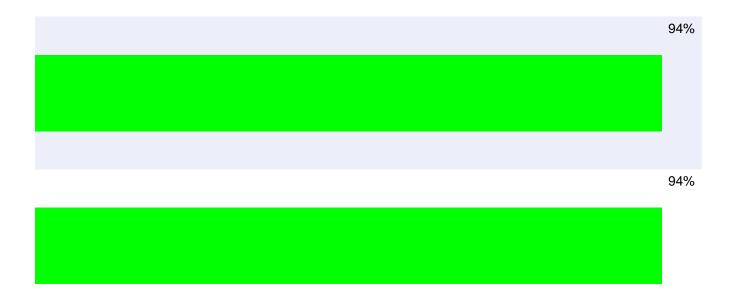
Page 23 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
	97		
N/A		No data is available from the hospital for this measure	
	117	The hospital indicated that the data submitted for this measure were based on a sample of cases	
	366	The hospital indicated that the data submitted for this measure were based on a sample of cases	
N/A		No data is available from the hospital for this measure	

Page 24 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project





N/A

Page 25 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project		
	109	
N/A		No data is available from the hospital for this measure
	126	The hospital indicated that the data submitted for this measure were based on a sample of cases
	391	The hospital indicated that the data submitted for this measure were based on a sample of cases
N/A		No data is available from the hospital for this measure

Page 26 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project







N/A

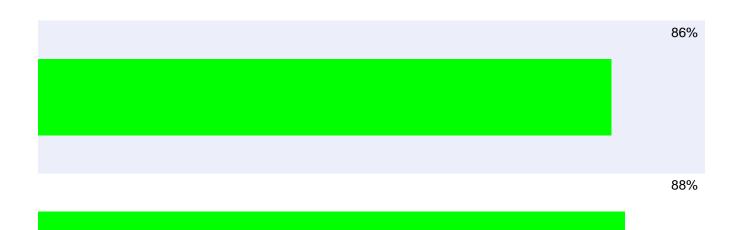
Page 27 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
	57		
N/A		No data is available from the hospital for this measure	
	65	The hospital indicated that the data submitted for this measure were based on a sample of cases	
	234	The hospital indicated that the data submitted for this measure were based on a sample of cases	
N/A		No data is available from the hospital for this measure	

Page 28 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project







Page 29 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based on Hospital Process of Care Measures – Surgical Care Improvement Project						
	58					
N/A		No data is available from the hospital for this measure				
	66	The hospital indicated that the data submitted for this measure were based on a sample of cases				
	234	The hospital indicated that the data submitted for this measure were based on a sample of cases				
N/A		No data is available from the hospital for this measure				

Page 30 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

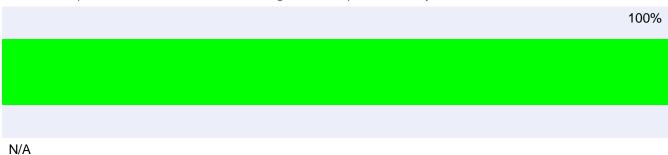
	ı	0	,	
N/A				
N/A				
N/A				
				93%
N/A				

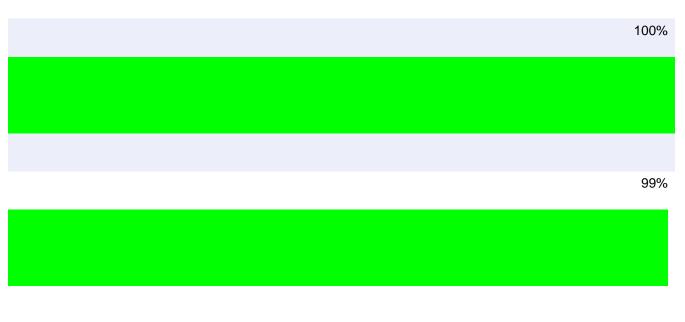
Page 31 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project					
	0				
N/A		No data is available from the hospital for this measure			
	0	The hospital indicated that the data submitted for this measure were based on a sample of cases			
	86	The hospital indicated that the data submitted for this measure were based on a sample of cases			
N/A		No data is available from the hospital for this measure			

Page 32 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

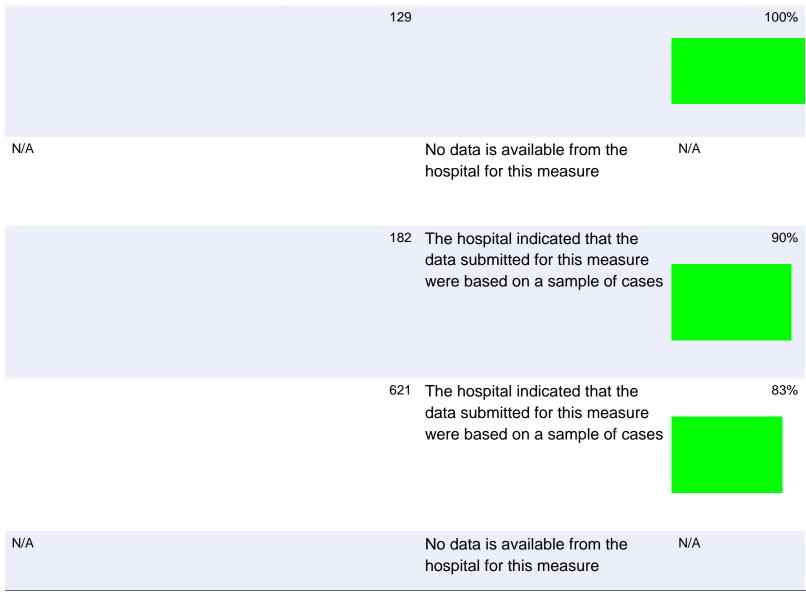




N/A

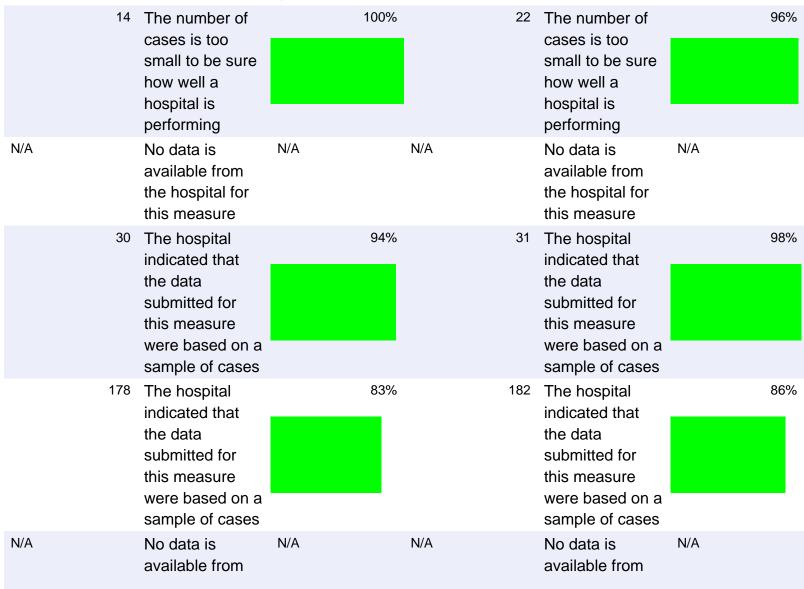
Page 33 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 34 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 35 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 36 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250126	NORTH OAK REGIONAL MEDICAL	401 GETWELL DR
	CENTER	

250141	BAPTIST MEMORIAL HOSPITAL DESOTO	7601 SOUTHCREST DR
250082	DELTA REGIONAL MEDICAL CENTER	1400 E UNION ST

Page 37 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

SENATOBIA

TATE

SOUTHAVEN DESOTO

GREENVILLE

WASHINGTON

Page 38 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

97%





Page 39 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

32

385 The hospital indicated that the data submitted for this measure were based on a sample of cases

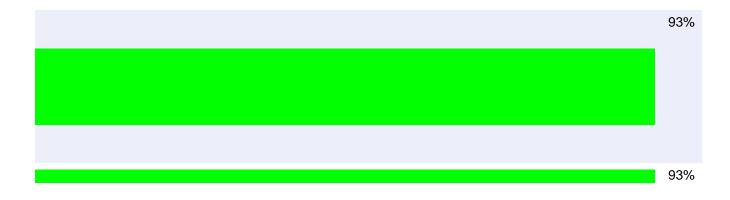
306

Page 40 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

88%





Page 41 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

32

The hospital indicated that the data submitted for this measure were based on a sample of cases

275

Page 42 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

72%





Page 43 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

32

The hospital indicated that the data submitted for this measure were based on a sample of cases

307

Page 44 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

67%





Page 45 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

12 The number of cases is too small to be sure how well a hospital is performing

239 The hospital indicated that the data submitted for this measure were based on a sample of cases

154

Page 46 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

67%





Page 47 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

12 The number of cases is too small to be sure how well a hospital is performing

239 The hospital indicated that the data submitted for this measure were based on a sample of cases

159

Page 48 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 49 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

0

The hospital indicated that the data submitted for this measure were based on a sample of cases

54

Page 50 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

100%

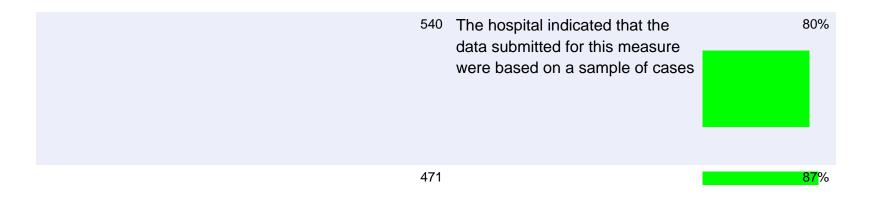




Page 51 of 324 05/31/2011

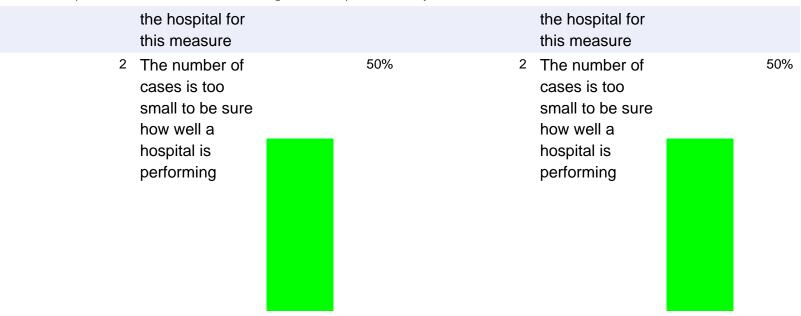
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

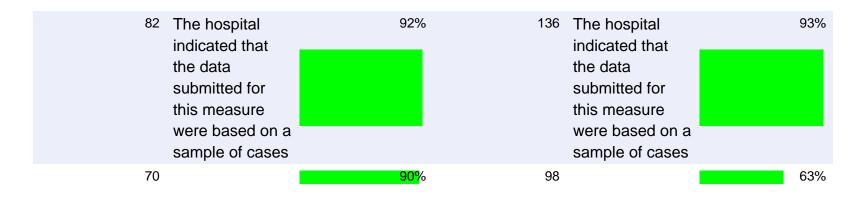
42 0%



Page 52 of 324 05/31/2011

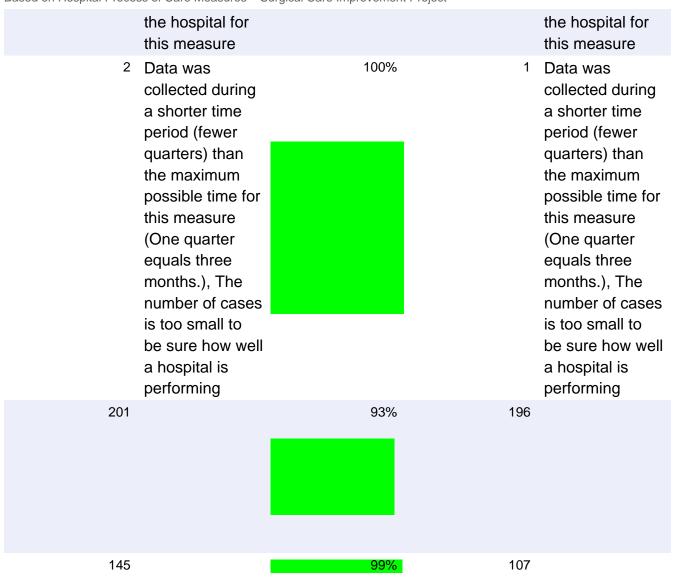
Based on Hospital Process of Care Measures – Surgical Care Improvement Project





Page 53 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 54 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250093	BOLIVAR MEDICAL CENTER	HWY 8 E
250095	SOUTH SUNFLOWER COUNTY HOSPITAL	121 E BAKER ST

250004	NORTH MISSISSIPPI MEDICAL CENTER	830 S GLOSTER

Page 55 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

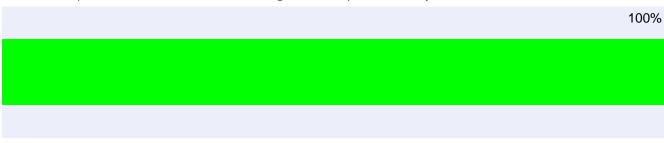
CLEVELAND BOLIVAR

INDIANOLA SUNFLOWER

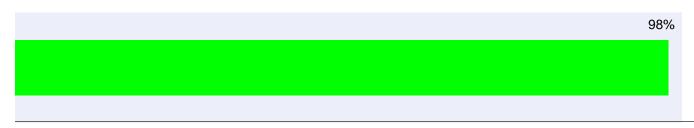
TUPELO LEE

Page 56 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A



Page 57 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

88

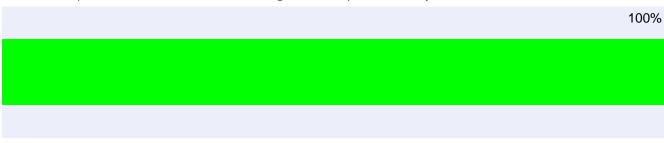
N/A

No data is available from the hospital for this measure

1539 The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 58 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A



Page 59 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

76

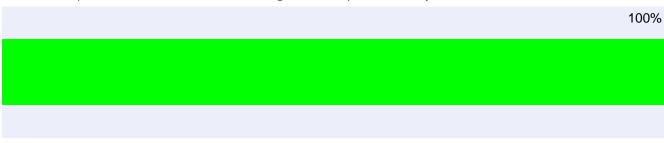
N/A

No data is available from the hospital for this measure

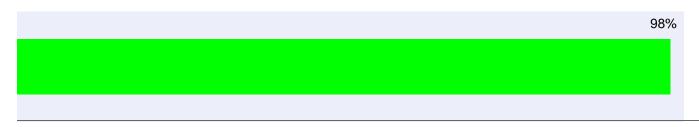
The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 60 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A



Page 61 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

88

N/A

No data is available from the hospital for this measure

The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 62 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



92%

Page 63 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

81

N/A

No data is available from the hospital for this measure

313 The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 64 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



92%

Page 65 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

81

N/A

No data is available from the hospital for this measure

318 The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 66 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 67 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

0

N/A

No data is available from the hospital for this measure

577 The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 68 of 324 05/31/2011

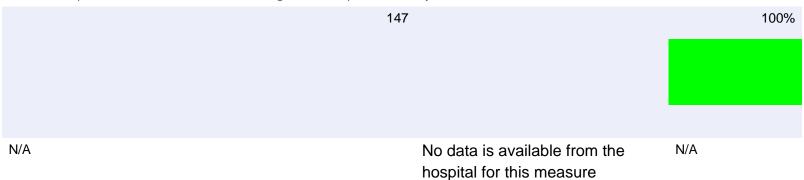
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

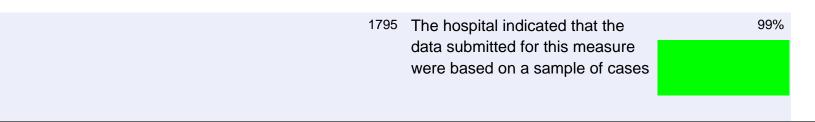


100%

Page 69 of 324 05/31/2011

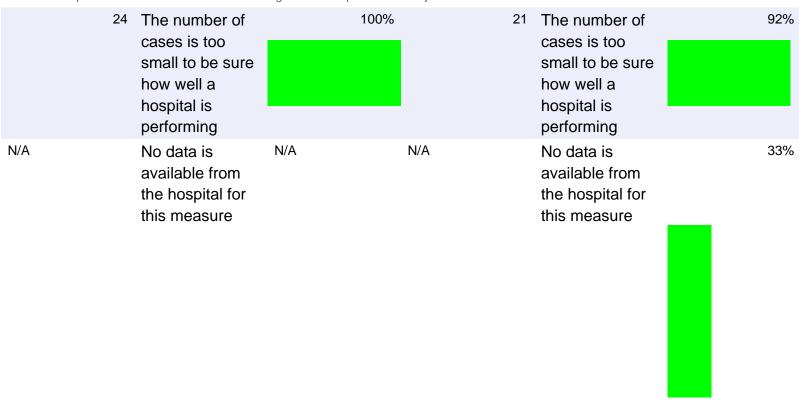
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

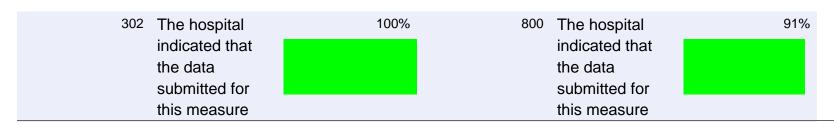




Page 70 of 324 05/31/2011

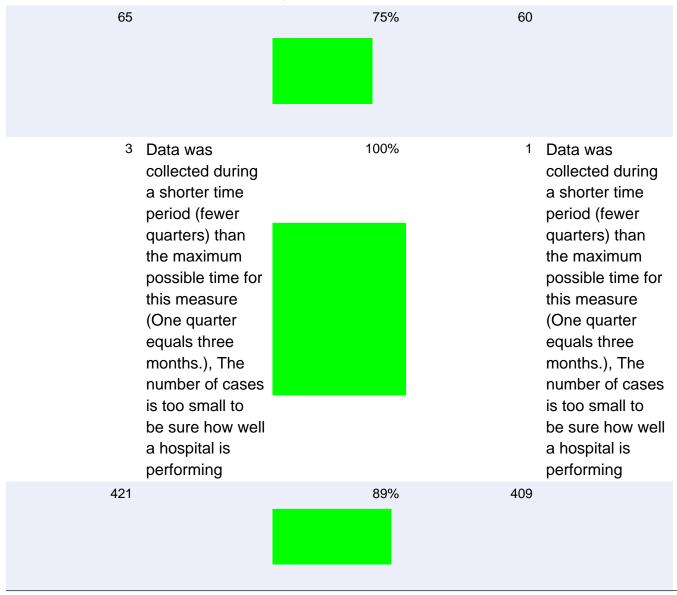
Based on Hospital Process of Care Measures – Surgical Care Improvement Project





Page 71 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 72 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250025	GILMORE MEMORIAL HOSPITAL	1105 EARL FRYE BLVD

250044	BAPTIST MEMORIAL HOSPITAL BOONEVILLE	100 HOSPITAL DRIVE
250009	MAGNOLIA REGIONAL HEALTH CENTER	611 ALCORN DRIVE

Page 73 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

AMORY MONROE

BOONEVILLE PRENTISS

CORINTH ALCORN

Page 74 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 75 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

58

N/A

No data is available from the hospital for this measure

543

Page 76 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 77 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

55

N/A

No data is available from the hospital for this measure

525

Page 78 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 79 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

55

N/A

No data is available from the hospital for this measure

549

Page 80 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 81 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

64

279

N/A

No data is available from the hospital for this measure

Page 82 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 83 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

67

279

N/A

No data is available from the hospital for this measure

Page 84 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project





Page 85 of 324 05/31/2011

N/A

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

0

No data is available from the

hospital for this measure

147

Page 86 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



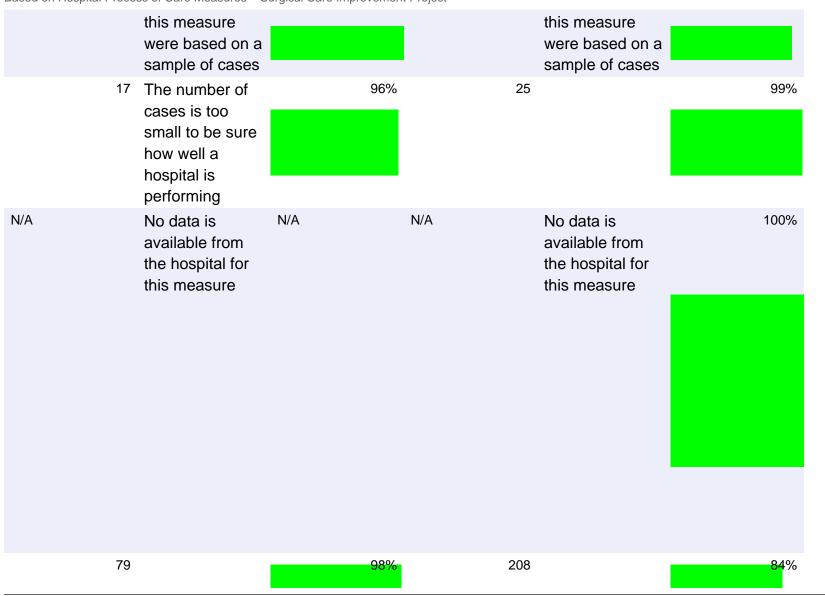
Page 87 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 88 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 89 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 90 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

CENTER

250017 TRACE REGIONAL HOSP AND

SWING BED

1004 EAST MADISON

STREET

250002	TISHOMINGO HEALTH SERVICES INC	1777 CURTIS DRIVE
251308	PONTOTOC HEALTH SERVICE CAH	176 SOUTH MAIN STREET
250015	GRENADA LAKE MEDICAL CENTER	960 AVENT DRIVE

Page 91 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

HOUSTON CHICKASAW

IUKA TISHOMINGO

PONTOTOC PONTOTOC

GRENADA GRENADA

Page 92 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

N/A

100%

Page 93 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	No data is available from the
	hospital for this measure

N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
	48 The hospital indicated that the

Page 94 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

94%

Page 95 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	No data is available from the
	hospital for this measure

N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
	48 The hospital indicated that the

Page 96 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

94%

Page 97 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	No data is available from the
	hospital for this measure

N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
	48 The hospital indicated that the

Page 98 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

97%

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	No data is available from the
	hospital for this measure

N/A	No data is available from the hospital for this measure	
N/A	No data is available from the hospital for this measure	
	34 The hospital indicated that the	

Page 100 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

97%

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	No data is available from the
	hospital for this measure

N/A	No data is available from the hospital for this measure	
N/A	No data is available from the hospital for this measure	
	34 The hospital indicated that the	

Page 102 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

N/A

N/A

Page 103 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	No data is available from the
	hospital for this measure

N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
	O The hospital indicated that the

Page 104 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A

N/A

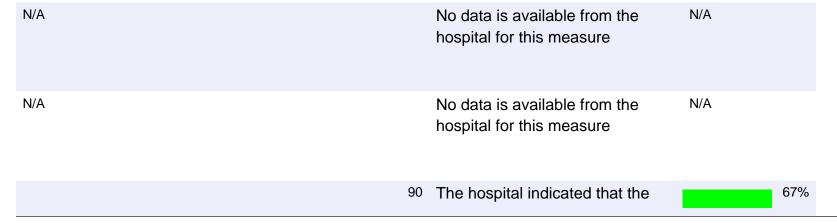
N/A

100%

Page 105 of 324 05/31/2011

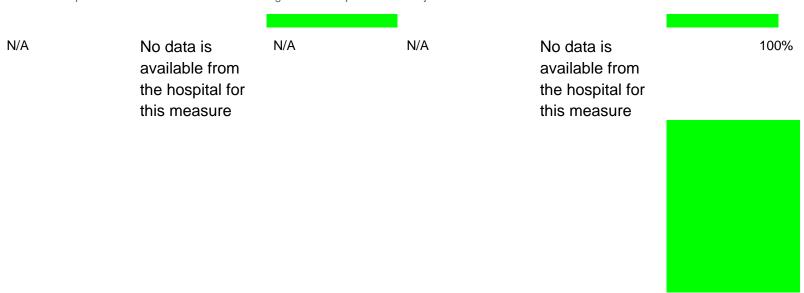
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A No data is available from the N/A hospital for this measure



Page 106 of 324 05/31/2011

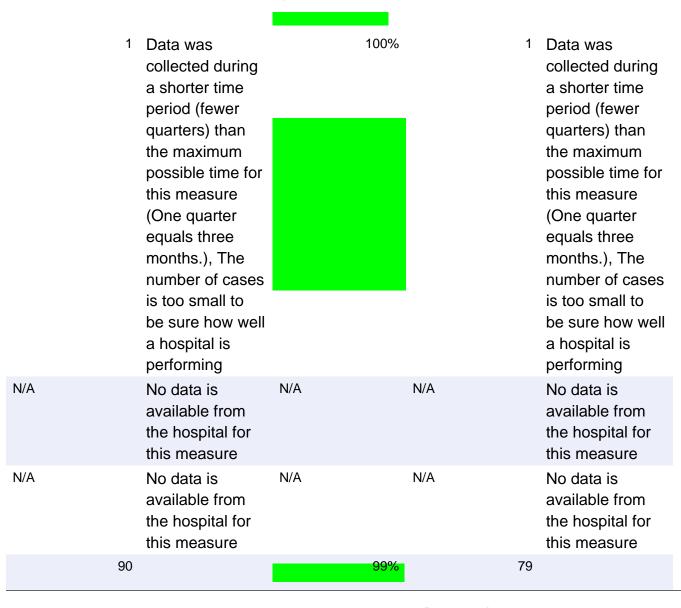
Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A
	3 The hospital	88%	17	The hospital	87%

Page 107 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 108 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250099	GREENWOOD LEFLORE HOSPITAL	1401 RIVER RD DRAWER 1410
250061	YALOBUSHA GENERAL HOSPITAL	630 SOUTH MAIN STREET
250096	CROSSGATES RIVER OAKS HOSPITAL	350 CROSSGATES BLVD
250038	MADISON REGIONAL MEDICAL CENTER	1421 EAST PEACE ST

Page 109 of 324 05/31/2011

Based on Hospital Process of	f Care Measures – Surgical Care Improvement Project
GREENWOOD	LEFLORE
WATER VALLEY	YALOBUSHA
BRANDON	RANKIN
CANTON	MADISON

Page 110 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project N/A 99% 100%

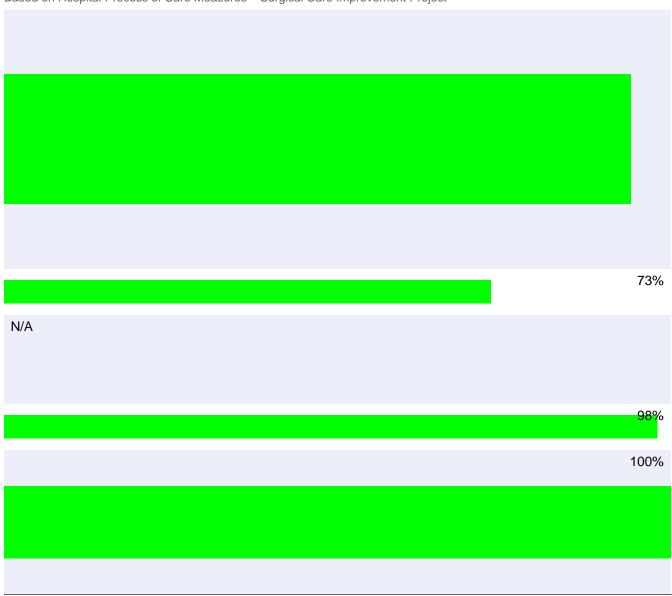
Page 111 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
		data submitted for this measure were based on a sample of cases	
	267		
N/A		No data is available from the hospital for this measure	
	68		
	21	The number of cases is too small to be sure how well a hospital is performing	

Page 112 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 113 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
		data submitted for this measure were based on a sample of cases	
	260		
N/A		No data is available from the hospital for this measure	
	62		
	19	The number of cases is too small to be sure how well a hospital is performing	

Page 114 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



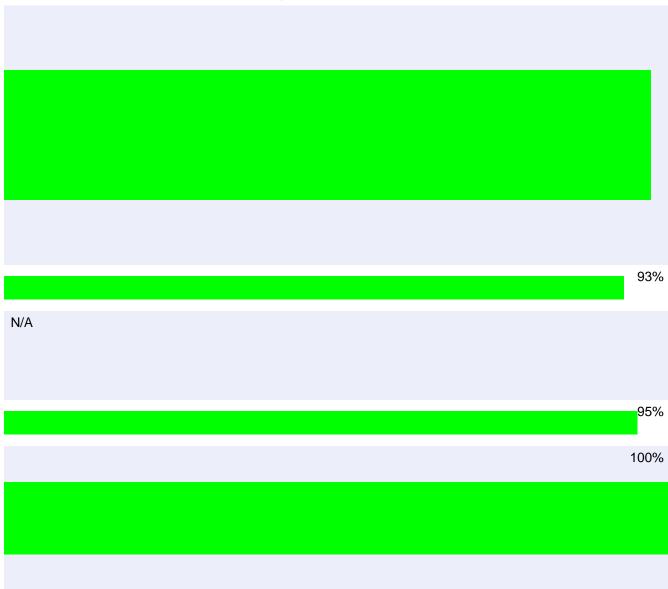
Page 115 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based on Hospital Process of Care ivieasures – Surgical Care Improvement Project			
		data submitted for this measure were based on a sample of cases	
	267		
N/A		No data is available from the hospital for this measure	
	70		
	22	The number of cases is too small to be sure how well a hospital is performing	

Page 116 of 324 05/31/2011





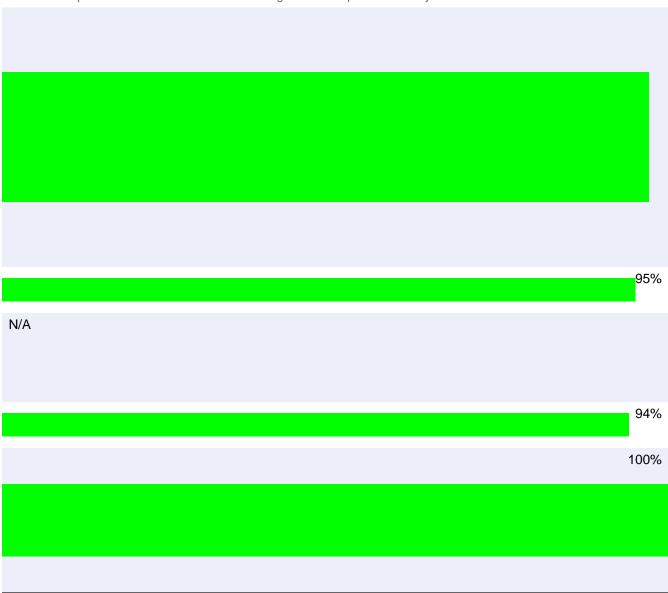
Page 117 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based on Hospital Process of Care inteasures – Surgical Care improvement Project				
		data submitted for this measure were based on a sample of cases		
	170			
N/A		No data is available from the hospital for this measure		
	96			
	7	The number of cases is too small to be sure how well a hospital is performing		

Page 118 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 119 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based on Hospital Process of Care inleasures – Surgical Care Improvement Project			
		data submitted for this measure were based on a sample of cases	
	171		
N/A		No data is available from the hospital for this measure	
	97		
	7	The number of cases is too small to be sure how well a hospital is performing	

Page 120 of 324 05/31/2011

Page 121 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

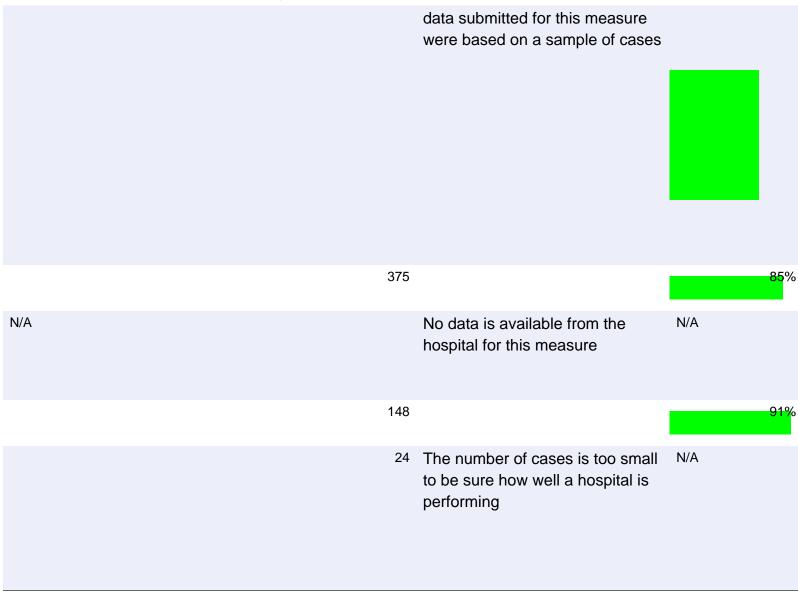
Based on Hospital Process of Care inleasures – Surgical Care Improvement Project			
		data submitted for this measure were based on a sample of cases	
	0		
N/A		No data is available from the hospital for this measure	
	0		
	0		
		hospital for this measure	

Page 122 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project 100% N/A 100% 100%

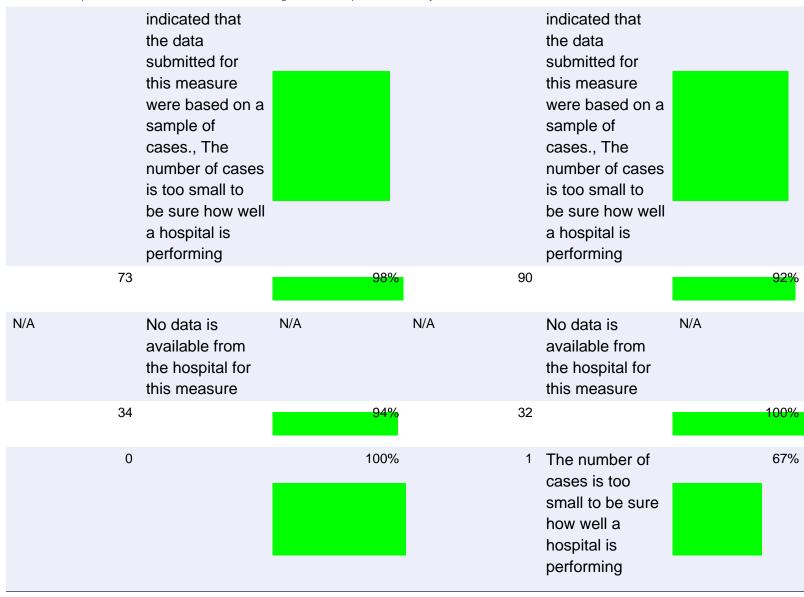
Page 123 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 124 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 125 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 126 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
250060	JEFFERSON COUNTY HOSPITAL	809 S MAIN BOX 577	
251300	LACKEY MEMORIAL HOSPITAL	330 N BROAD STREET	

Page 127 of 324 05/31/2011

Based on Hospital Process o	f Care Measures – Surgical Care Improvement Projec	t
FAYETTE	JEFFERSON	

FOREST SCOTT

Page 128 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A

Page 129 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project		
N/A	No data is available from the hospital for this measure	
N/A	No data is available from the hospital for this measure	

Page 130 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A

Page 131 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project					
N/A	No data is available from the hospital for this measure				
N/A	No data is available from the hospital for this measure				

Page 132 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A

Page 133 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project					
N/A	No data is available from the hospital for this measure				
N/A	No data is available from the hospital for this measure				

Page 134 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A

Page 135 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project					
N/A	No data is available from the hospital for this measure				
N/A	No data is available from the hospital for this measure				

Page 136 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A

Page 137 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project					
N/A	No data is available from the hospital for this measure				
N/A	No data is available from the hospital for this measure				

Page 138 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project
N/A
N/A

Page 139 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project				
N/A	No data is available from the hospital for this measure			
N/A	No data is available from the hospital for this measure			

Page 140 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



N/A

Page 141 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project N/A No data is available from the N/A hospital for this measure N/A No data is available from the N/A hospital for this measure

Page 142 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based on Hospital Proce	555 Of Care Measures – C	digical Care improvemen	it i Toject			
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A	
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure		50%

Page 143 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

		possible time for this measure (One quarter equals three months.), The number of cases is too small to be sure how well a hospital is performing					possible time for this measure (One quarter equals three months.), The number of cases is too small to be sure how well a hospital is performing
N/A		No data is available from the hospital for this measure	N/A		N/A		No data is available from the hospital for this measure
	2	Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.), The number of cases is too small to		100%		2	Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.), The number of cases is too small to

Page 144 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250059	MONTFORT JONES MEMORIAL HOSPITAL	220 HWY 12 WEST
251319	HOLMES COUNTY HOSPITAL AND CLINICS	239 BOWLING GREEN ROAD
250124	MAGEE GENERAL HOSPITAL	300 3RD AVE SE

Page 145 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

KOSCIUSKO ATTALA

LEXINGTON HOLMES

MAGEE SIMPSON

Page 146 of 324 05/31/2011

Based on Hospital Proces	ss of Care Measures	s – Surgical Care	Improvement	Project

N/A

N/A

N/A

Page 147 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

based of Flospital Flocess of Care Measures – Surgical Care Improvement	Toject
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure

Page 148 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project	t

N/A

N/A

N/A

Page 149 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

based on Hospital Flocess of Care Measures — Surgical Care Improvement	TOJECT
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure

Page 150 of 324 05/31/2011

Based on Hospital Pro	cess of Care Measure	es – Surgical Care	Improvement F	Project

N/A

N/A

N/A

Page 151 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

based on Hospital Flocess of Care Measures — Surgical Care Improvement	TOJECT
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure

Page 152 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement	nt Project

N/A

N/A

N/A

Page 153 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

based on Hospital Flocess of Care Measures — Surgical Care Improvement	TOJECT
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure

Page 154 of 324 05/31/2011

Based on Hos	pital Process	of Care	Measures	Surgical	Care	Improvement	Project

N/A

N/A

N/A

Page 155 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

based on Hospital Flocess of Care Measures — Surgical Care Improvement	TOJECT
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure

Page 156 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project	

N/A

N/A

N/A

Page 157 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

based on nospital Process of Care Measures – Surgical Care Improvement	Project
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure

Page 158 of 324 05/31/2011

Based on Hospital Process	of Care Measures -	 Surgical Care 	Improvement I	Project

N/A

N/A

N/A

Page 159 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

	7 - 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4	
N/A	No data is available from the hospital for this measure	N/A
N/A	No data is available from the hospital for this measure	N/A
N/A	No data is available from the hospital for this measure	N/A

Page 160 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

24004 011 1 100pital 1 100t		Cargical Caro Improveme				
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A	
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A	
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure		67%

Page 161 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Dadda dii i loopitai i To	ccss of care incasares - c	argical care improvemen	t i iojoot	
	is too small to be sure how well a hospital is performing			is too small to be sure how well a hospital is performing
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure
	Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.), The number of cases is too small to be sure how well	100%	8	Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.), The number of cases is too small to be sure how well

Page 162 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250084	NATCHEZ REGIONAL MEDICAL CENTER	52 SEARGENT PRENTISS DRIVE
250122	NATCHEZ COMMUNITY HOSPITAL/SWING BED	129 JEFFERSON DAVIS BLVD BOX 1203
250079	SHARKEY ISSAQUENA COMMUNITY HOSPITAL	47 SOUTH 4 ST
250031	RIVER REGION HEALTH SYSTEM	2100 HWY 61 N
250134	WHITFIELD MEDICAL SURGICAL HOSPITAL	3550 HWY 468 W, BLDG 60
250102	MISSISSIPPI BAPTIST MEDICAL CENTER	1225 N STATE ST

Page 163 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

NATCHEZ ADAMS

NATCHEZ ADAMS

ROLLING FORK SHARKEY

VICKSBURG WARREN

WHITFIELD RANKIN

JACKSON HINDS

Page 164 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 165 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

120

	50	
N/A	No data is available from the hospital for this measure	
	291	
N/A	No data is available from the hospital for this measure	
	783 The hospital indicated that the data submitted for this measure were based on a sample of control of the data submitted for the data	ure

Page 166 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 167 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

116

	47	
N/A		No data is available from the hospital for this measure
	278	
N/A		No data is available from the hospital for this measure
	754	The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 168 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 169 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

116

	50	
N/A		No data is available from the hospital for this measure
	297	nospital for this measure
N/A	231	No data is available from the hospital for this measure
	793	The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 170 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 171 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

97

	50	
N/A	No data is available from the hospital for this measure	
	243	
N/A	No data is available from the hospital for this measure	
	292 The hospital indicated that the data submitted for this measure were based on a sample of cas	

Page 172 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 173 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

100

	50	
N/A	No data is available hospital for this meas	
	245	
N/A	No data is available the hospital for this meas	
	The hospital indicate data submitted for the were based on a san	is measure

Page 174 of 324 05/31/2011

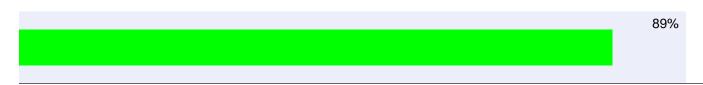
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



94%

N/A



Page 175 of 324 05/31/2011

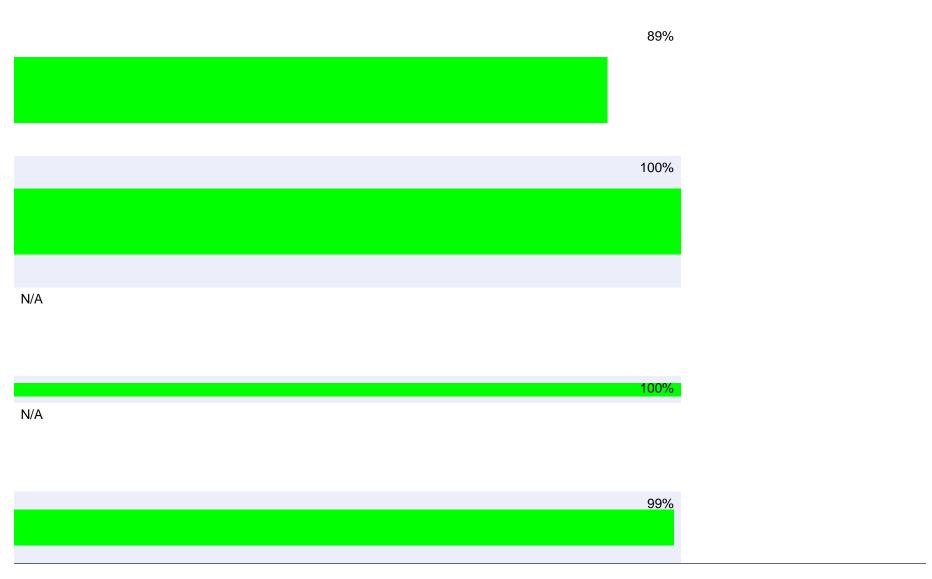
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

0

	0	
N/A		No data is available from the hospital for this measure
	82	
N/A		No data is available from the hospital for this measure
	169	The hospital indicated that the data submitted for this measure were based on a sample of cases

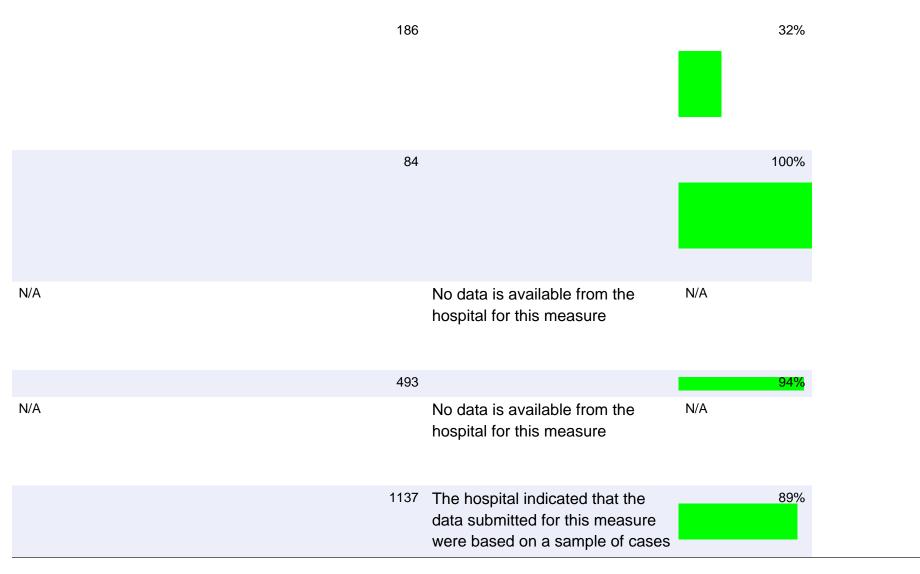
Page 176 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



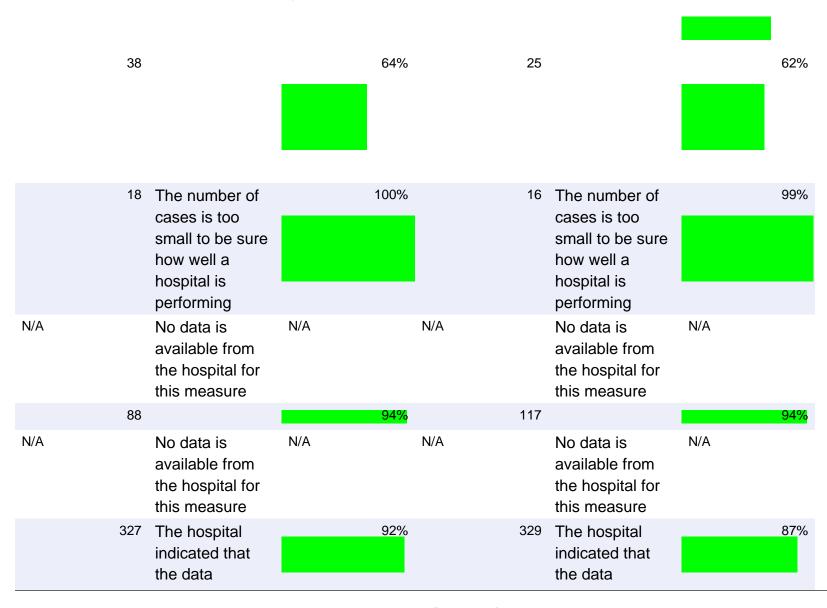
Page 177 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



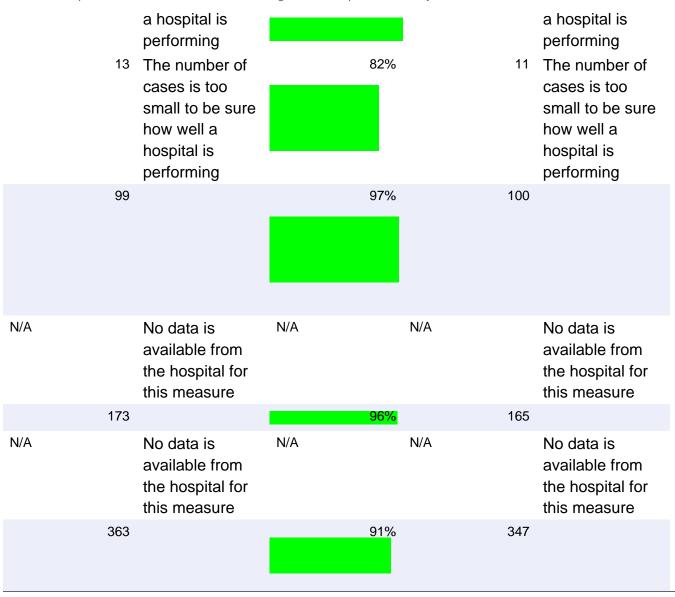
Page 178 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 179 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 180 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Based of Flospital Flocess of Care Measures – Surgical Care		
250072	CENTRAL MISSISSIPPI MEDICAL CENTER	1850 CHADWICK DR
250001	UNIVERSITY OF MISSISSIPPI MED CENTER	2500 N STATE ST
250048	ST DOMINIC-JACKSON MEMORIAL HOSPITAL	969 LAKELAND DR
250136	WOMAN'S HOSPITAL AT RIVER OAKS	1026 NORTH FLOWOOD

Page 181 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

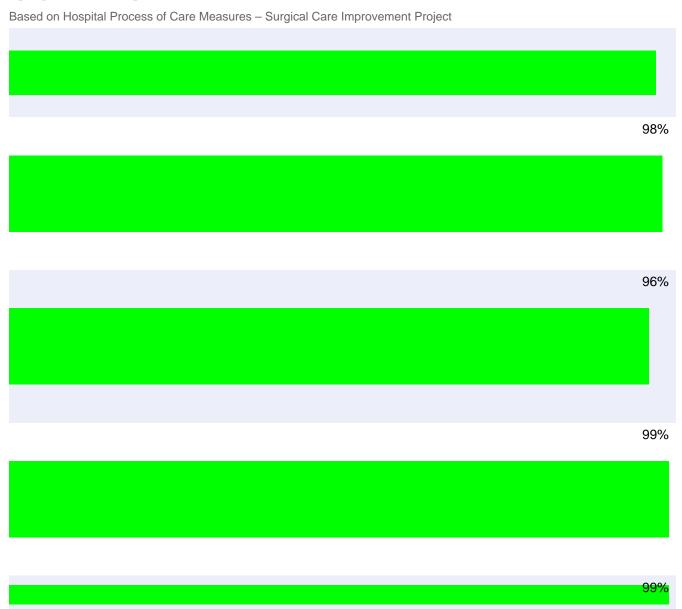
JACKSON HINDS

JACKSON HINDS

JACKSON HINDS

JACKSON HINDS

Page 182 of 324 05/31/2011



Page 183 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

191 The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

160

Page 184 of 324 05/31/2011



Page 185 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

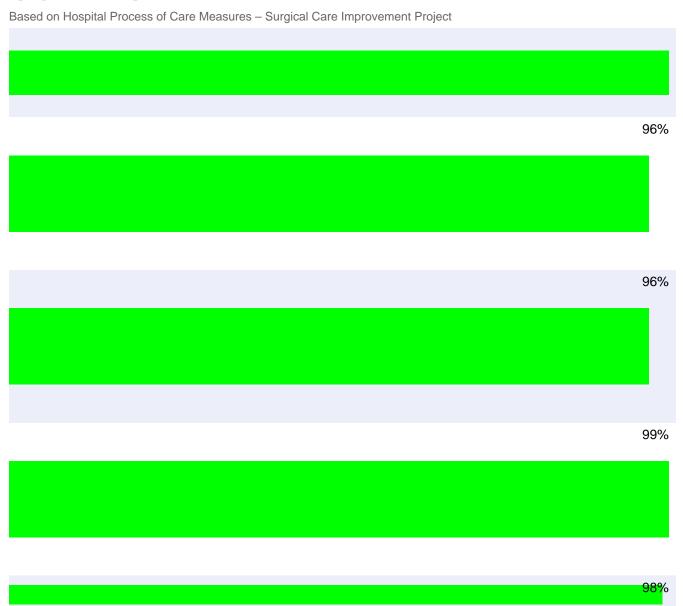
177 The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

160

Page 186 of 324 05/31/2011



Page 187 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

191 The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

498 The hospital indicated that the data submitted for this measure were based on a sample of cases

163

Page 188 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project 91% 91% 97%

Page 189 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

130 The hospital indicated that the data submitted for this measure were based on a sample of cases

349 The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

13 The number of cases is too small

Page 190 of 324 05/31/2011



Page 191 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

The hospital indicated that the data submitted for this measure were based on a sample of cases

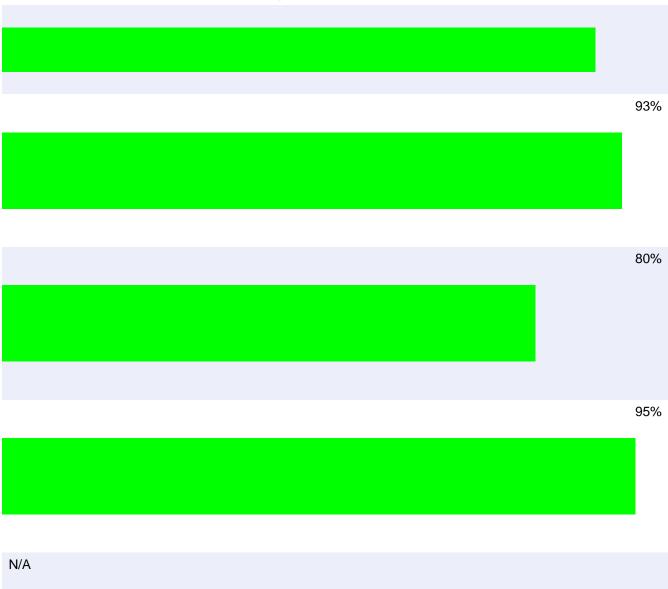
353 The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

13 The number of cases is too small

Page 192 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 193 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

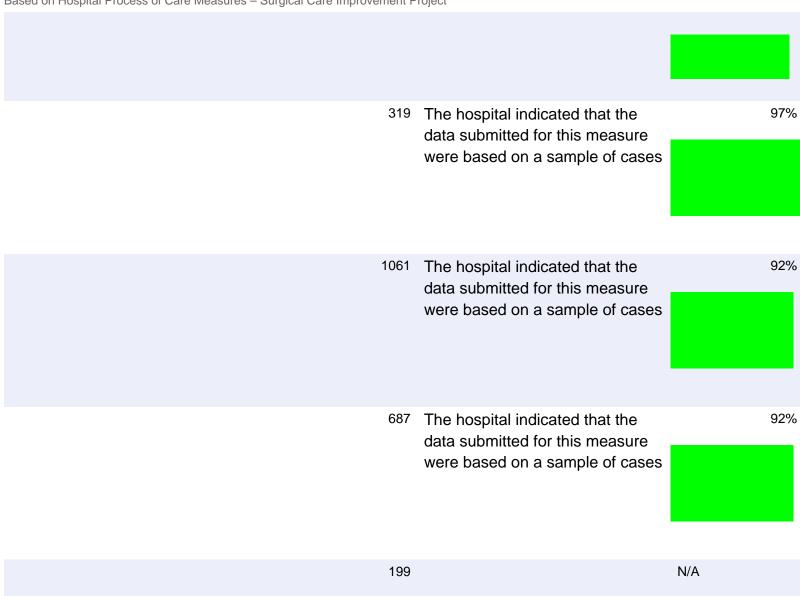
0

Page 194 of 324 05/31/2011



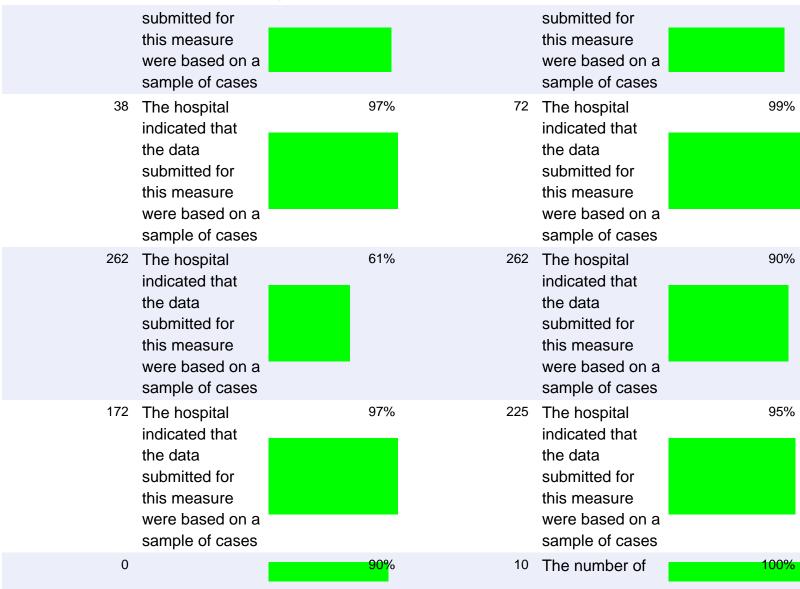
Page 195 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



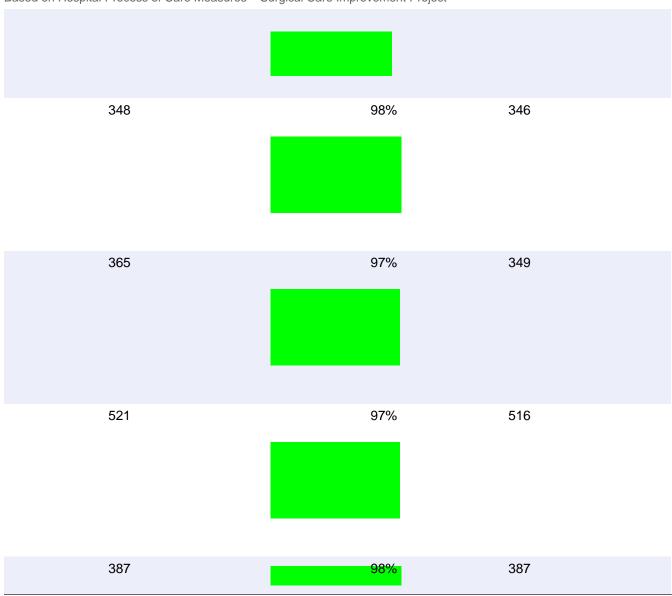
Page 196 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 197 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 198 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project			
		DRIVE	
250069	RUSH FOUNDATION HOSPITAL	1314 19TH AVE	
250081	RILEY HOSPITAL	1102 CONSTITUTION AVENUE	
250104	ANDERSON REGIONAL MEDICAL CENTER	2124 14 ST	
250027	WINSTON MEDICAL CENTER &	562 EAST MAIN STREET	

Page 199 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

MERIDIAN LAUDERDALE

MERIDIAN LAUDERDALE

MERIDIAN LAUDERDALE

LOUISVILLE WINSTON

Page 200 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project 99% 99% 93% N/A

Page 201 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

The hospital indicated that the data submitted for this measure were based on a sample of cases

73

401 The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 202 of 324 05/31/2011



Page 203 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

276 The hospital indicated that the data submitted for this measure were based on a sample of cases

67

The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 204 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project 99% 97% 97% N/A

Page 205 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

The hospital indicated that the data submitted for this measure were based on a sample of cases

74

407 The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 206 of 324 05/31/2011



Page 207 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

to be sure how well a hospital is performing

230 The hospital indicated that the data submitted for this measure were based on a sample of cases

46

248 The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 208 of 324 05/31/2011



Page 209 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

to be sure how well a hospital is performing

230 The hospital indicated that the data submitted for this measure were based on a sample of cases

46

250 The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 210 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project 100% N/A 80% N/A

Page 211 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

24 The hospital indicated that the data submitted for this measure were based on a sample of cases., The number of cases is too small to be sure how well a hospital is performing

0

The hospital indicated that the data submitted for this measure were based on a sample of cases

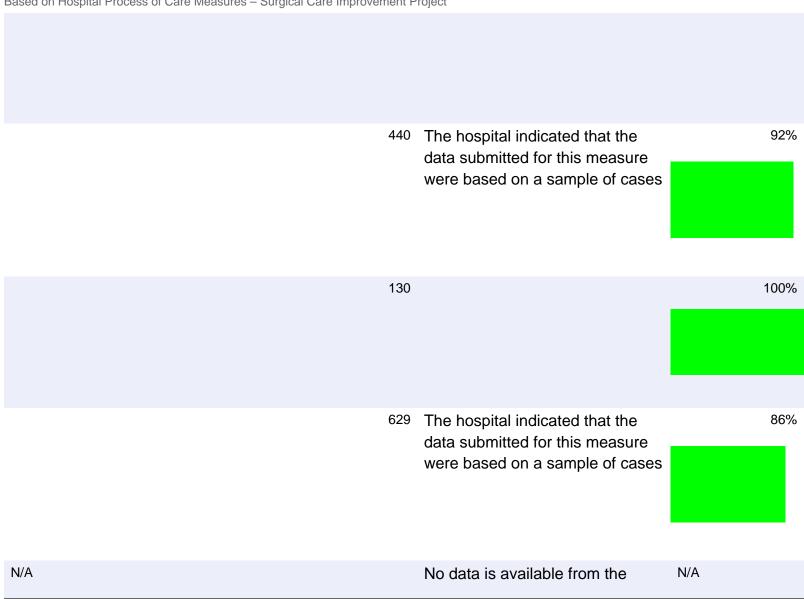
N/A No data is available from the

Page 212 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project 100% 100% 99% N/A

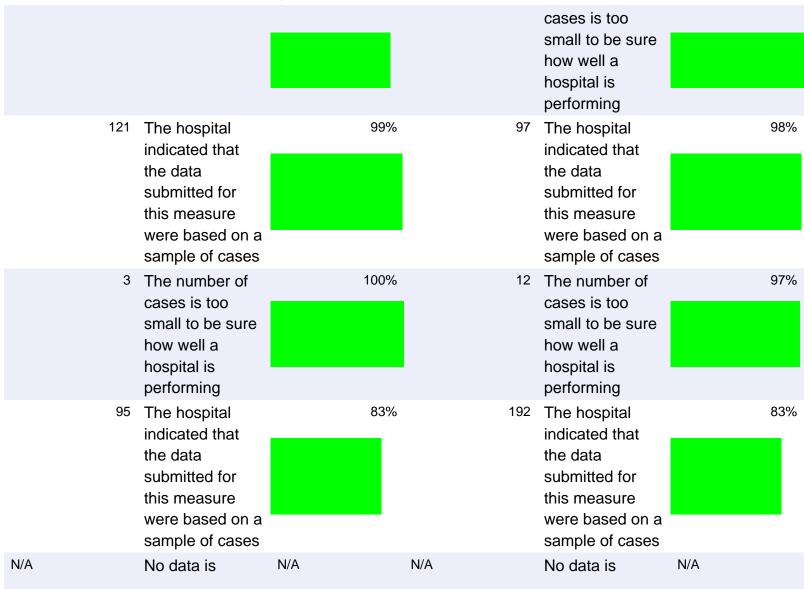
Page 213 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



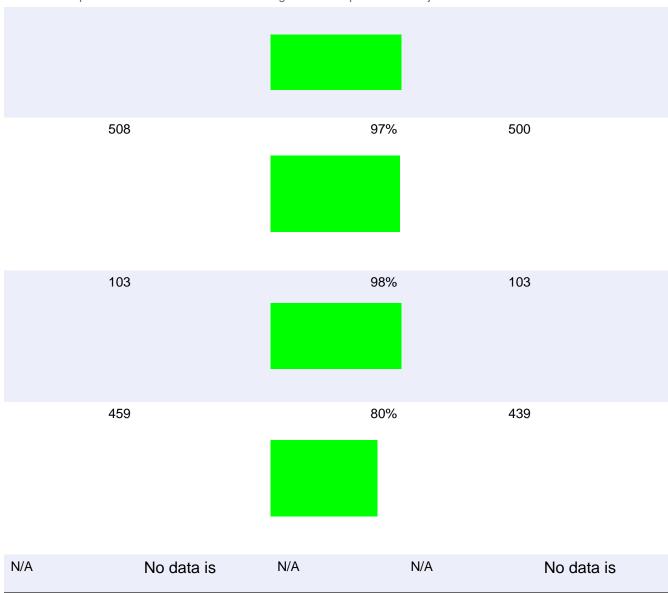
Page 214 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 215 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 216 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

based on hospital Process of Care Measures – Surgical Care	improvement Project	
	SWINGBED	
250043	NESHOBA COUNTY GENERAL HOSPITAL	1001 HOLLAND AVENUE
250077	WAYNE GENERAL HOSPITAL	950 MATTHEW DR
250094	WESLEY MEDICAL CENTER	5001 W HARDY ST
250078	FORREST GENERAL HOSPITAL	6051 US HIGHWAY 49
250085	MARION GENERAL HOSPITAL	1560 SUMRALL RD P O BOX 630

Page 217 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

PHILADELPHIA NESHOBA

WAYNESBORO WAYNE

HATTIESBURG FORREST HATTIESBURG FORREST

COLUMBIA MARION

Page 218 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 219 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

Based on Hospital Process of Care Measures – Surgical Care Improven	nent P	roject
		hospital for this measure
N/A		No data is available from the hospital for this measure
	11	The number of cases is too small to be sure how well a hospital is performing
	774	
	597	The hospital indicated that the data submitted for this measure were based on a sample of cases
	2	The number of cases is too small to be sure how well a hospital is performing

Page 220 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 221 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

based on nospital Process of Care Measures – Surgical Care Improver	nent F	Toject
		hospital for this measure
N/A		No data is available from the hospital for this measure
	11	The number of cases is too small to be sure how well a hospital is performing
	750	
	572	The hospital indicated that the data submitted for this measure were based on a sample of cases
	2	The number of cases is too small to be sure how well a hospital is performing

Page 222 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 223 of 324 05/31/2011

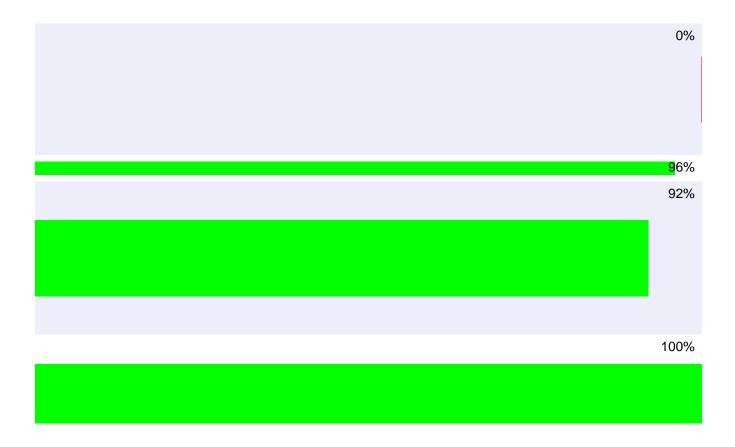
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Dased of Flospital Flocess of Cale Measures – Surgical Cale Improver	illollt i	Toject
		hospital for this measure
N/A		No data is available from the hospital for this measure
	11	The number of cases is too small to be sure how well a hospital is performing
	781	
	608	The hospital indicated that the data submitted for this measure were based on a sample of cases
	2	The number of cases is too small to be sure how well a hospital is performing

Page 224 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 225 of 324 05/31/2011

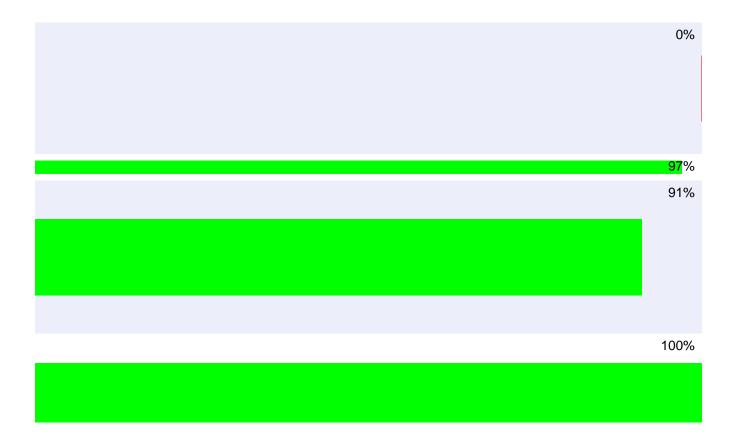
Based on Hospital Process of Care Measures - Surgical Care Improvement Project

based on hospital Process of Care Measures – Surgical Care Improven	ient F	Toject
		hospital for this measure
N/A		No data is available from the hospital for this measure
	14	The number of cases is too small to be sure how well a hospital is performing
	353	
	226	The hospital indicated that the data submitted for this measure were based on a sample of cases
	6	The number of cases is too small to be sure how well a hospital is performing

Page 226 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 227 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project

based on hospital Process of Care Measures – Surgical Care Improven	ient F	Toject
		hospital for this measure
N/A		No data is available from the hospital for this measure
	14	The number of cases is too small to be sure how well a hospital is performing
	353	
	232	The hospital indicated that the data submitted for this measure were based on a sample of cases
	6	The number of cases is too small to be sure how well a hospital is performing

Page 228 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



Page 229 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

based on nospital Process of Care Weasures – Surgical Care Improvement r	Toject
	hospital for this measure
N/A	No data is available from the hospital for this measure
0	
83	
190	The hospital indicated that the data submitted for this measure were based on a sample of cases
0	

Page 230 of 324 05/31/2011

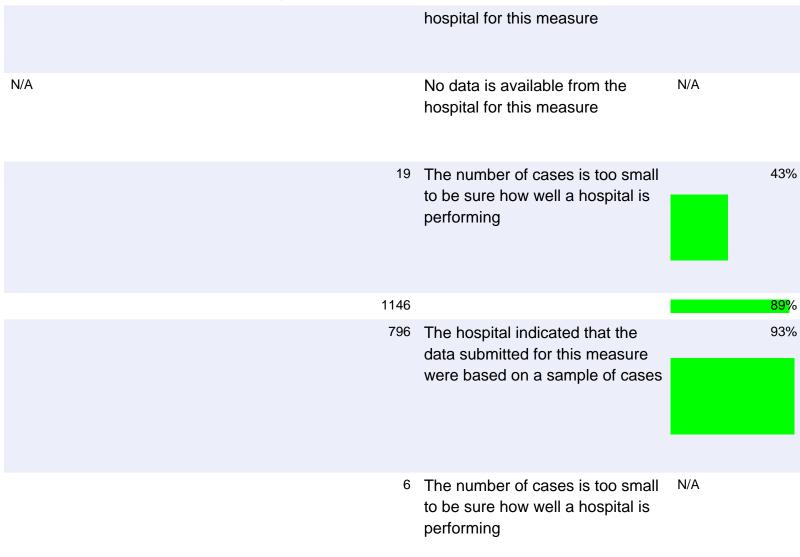
N/A

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

100%
100%
100%

Page 231 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 232 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

			9 1	· · · · · · · · · · · · · · · · · · ·				
		available from the hospital for this measure				available from the hospital for this measure		
N/A		No data is available from the hospital for this measure	N/A	N/A		No data is available from the hospital for this measure	N/A	
	7	The number of cases is too small to be sure how well a hospital is performing	0%		3	The number of cases is too small to be sure how well a hospital is performing	N/A	
	146		96%	<u>.</u>	329			99%
	234	The hospital indicated that the data submitted for this measure were based on a sample of cases	96%		285	The hospital indicated that the data submitted for this measure were based on a sample of cases		98%
	0		0%		2	The number of cases is too small to be sure how well a hospital is	N/A	

Page 233 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

		available from the hospital for this measure				available from the hospital for this measure
N/A		No data is available from the hospital for this measure	N/A	N/A		No data is available from the hospital for this measure
N/A		No data is available from the hospital for this measure	N/A	N/A		No data is available from the hospital for this measure
	300			98%	302	
	600			98%	302 598	

Page 234 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250058	SOUTH CENTRAL REG MED CTR	1220 JEFFERSON ST BOX 607
250036	GEORGE COUNTY HOSPITAL	859 WINTER STREET
250117	HIGHLAND COMMUNITY HOSPITAL	801 GOODYEAR BLVD

TEMELINIER GOOD THE GOOD ONE OF WOOD TO THEE	250023	PEARL RIVER COUNTY HOSPITAL	305 WEST MOODY STREET
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Page 235 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

LAUREL JONES

LUCEDALE GEORGE

PICAYUNE PEARL RIVER

POPLARVILLE PEARL RIVER

Page 236 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 237 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

354

8 The number of cases is too small to be sure how well a hospital is performing

47

N/A No data is available from the

Page 238 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 239 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

345

7 The number of cases is too small to be sure how well a hospital is performing

47

N/A No data is available from the

Page 240 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 241 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

354

8 The number of cases is too small to be sure how well a hospital is performing

47

N/A No data is available from the

Page 242 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 243 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

180

15 The number of cases is too small to be sure how well a hospital is performing

34

N/A No data is available from the

Page 244 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 245 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

181

15 The number of cases is too small to be sure how well a hospital is performing

34

N/A No data is available from the

Page 246 of 324 05/31/2011

N/A

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A		
N/A		
N/A		

Page 247 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

0

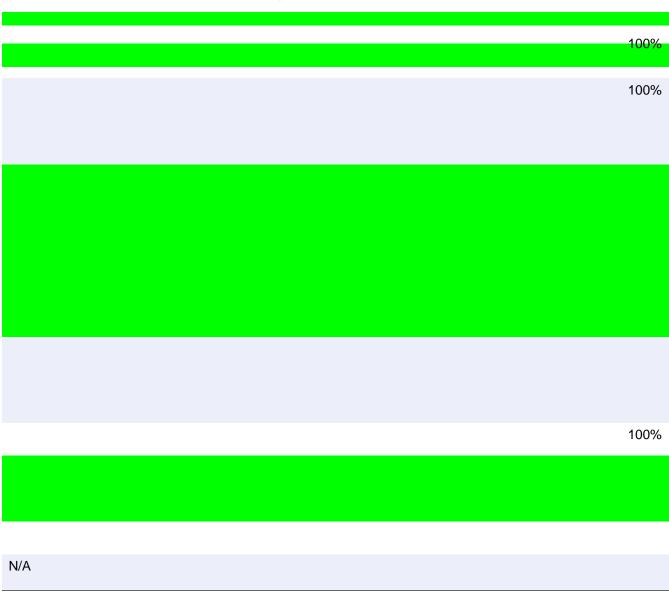
0

0

N/A No data is available from the

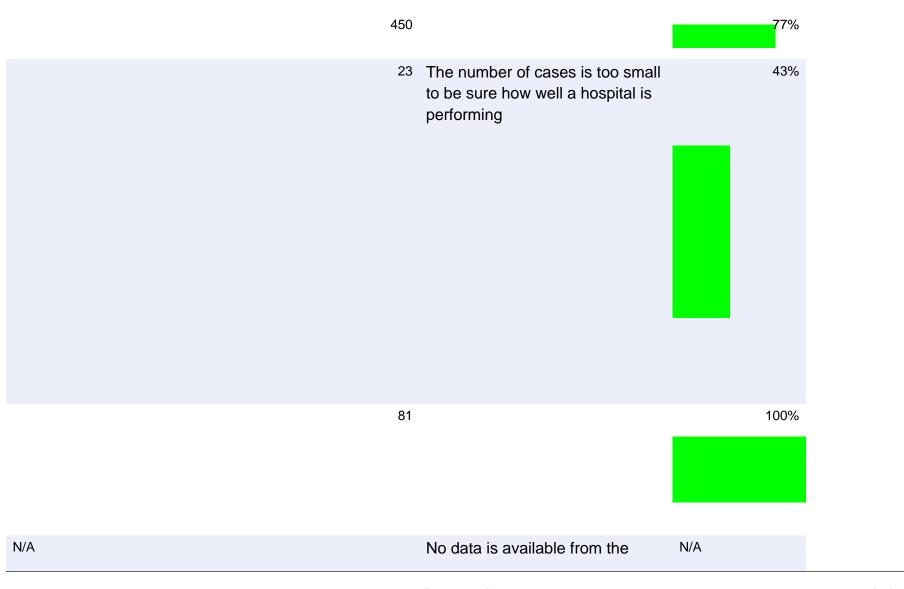
Page 248 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 249 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



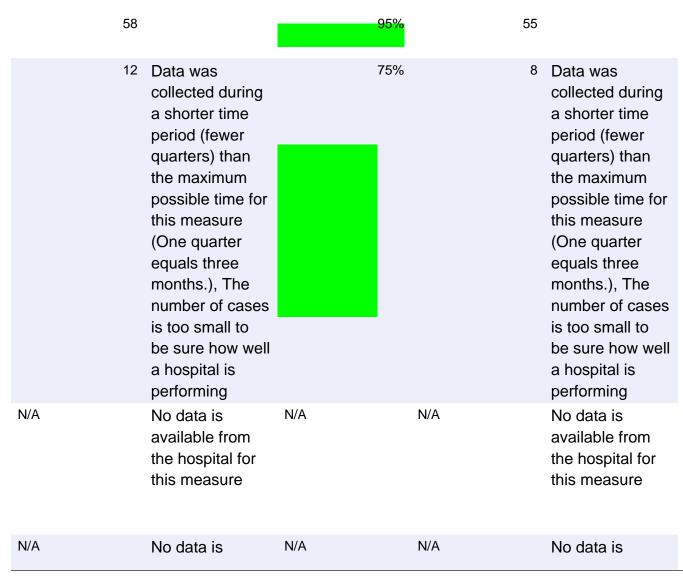
Page 250 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 251 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 252 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250123	GARDEN PARK MEDICAL CENTER	15200 COMMUNITY ROAD
250019	MEMORIAL HOSPITAL AT GULFPORT	4500 13TH ST-P O BOX 1810
250162	HANCOCK MEDICAL CENTER	149 DRINKWATER BLVD
250007	BILOXI REGIONAL MEDICAL CENTER	PO BOX 128/150 REYNOIR STREET
250040	SINGING RIVER HOSPITAL	2809 DENNY AV

Page 253 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

GULFPORT HARRISON

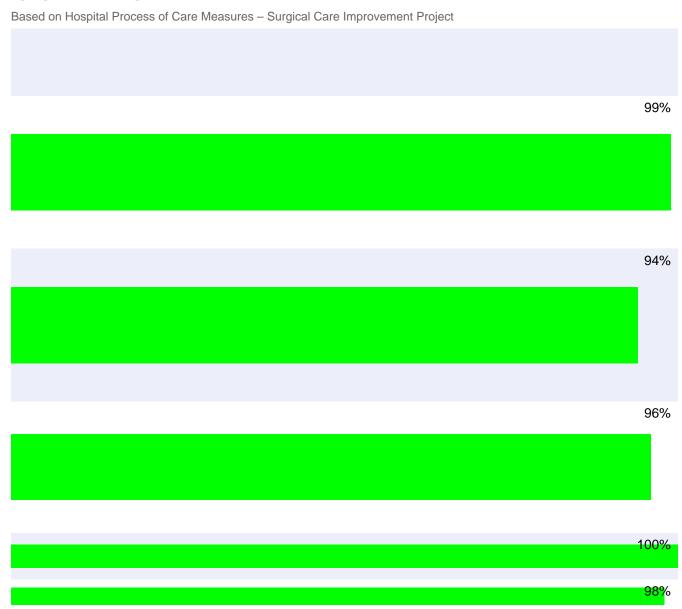
GULFPORT HARRISON

BAY SAINT LOUIS HANCOCK

BILOXI HARRISON

PASCAGOULA JACKSON

Page 254 of 324 05/31/2011



Page 255 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

hospital for this measure

237 The hospital indicated that the data submitted for this measure were based on a sample of cases

300 The hospital indicated that the data submitted for this measure were based on a sample of cases

53

228

767 The hospital indicated that the

Page 256 of 324 05/31/2011



Page 257 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

hospital for this measure

The hospital indicated that the data submitted for this measure were based on a sample of cases

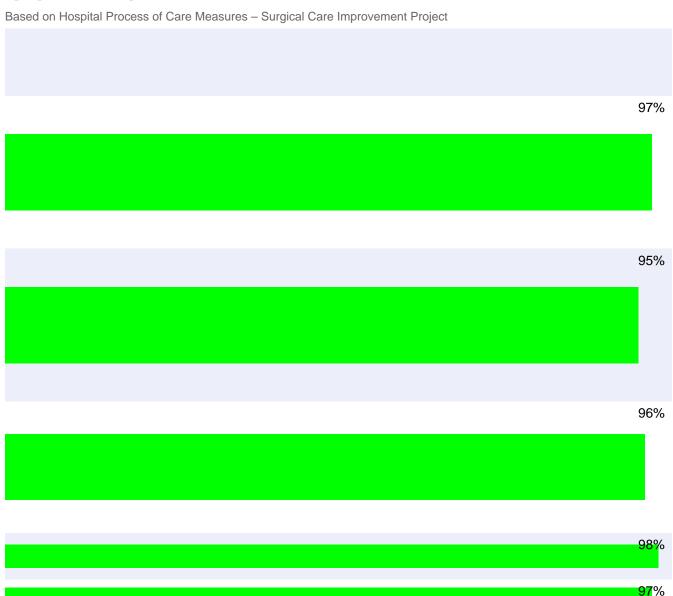
The hospital indicated that the data submitted for this measure were based on a sample of cases

51

218

724 The hospital indicated that the

Page 258 of 324 05/31/2011



Page 259 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

hospital for this measure

240 The hospital indicated that the data submitted for this measure were based on a sample of cases

303 The hospital indicated that the data submitted for this measure were based on a sample of cases

52

229

783 The hospital indicated that the

Page 260 of 324 05/31/2011



Page 261 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

hospital for this measure

The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

62

130

526 The hospital indicated that the

Page 262 of 324 05/31/2011



Page 263 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

hospital for this measure

The hospital indicated that the data submitted for this measure were based on a sample of cases

The hospital indicated that the data submitted for this measure were based on a sample of cases

62

130

526 The hospital indicated that the

Page 264 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



N/A 95%

Page 265 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

hospital for this measure

The hospital indicated that the data submitted for this measure were based on a sample of cases

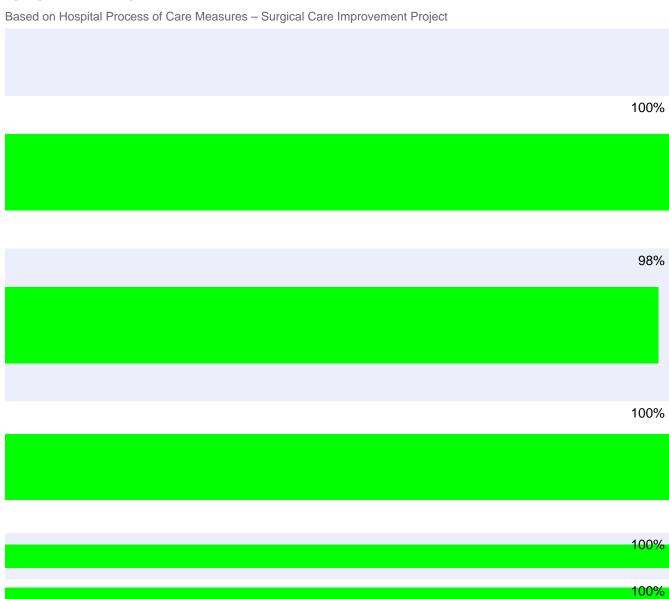
76 The hospital indicated that the data submitted for this measure were based on a sample of cases

0

0

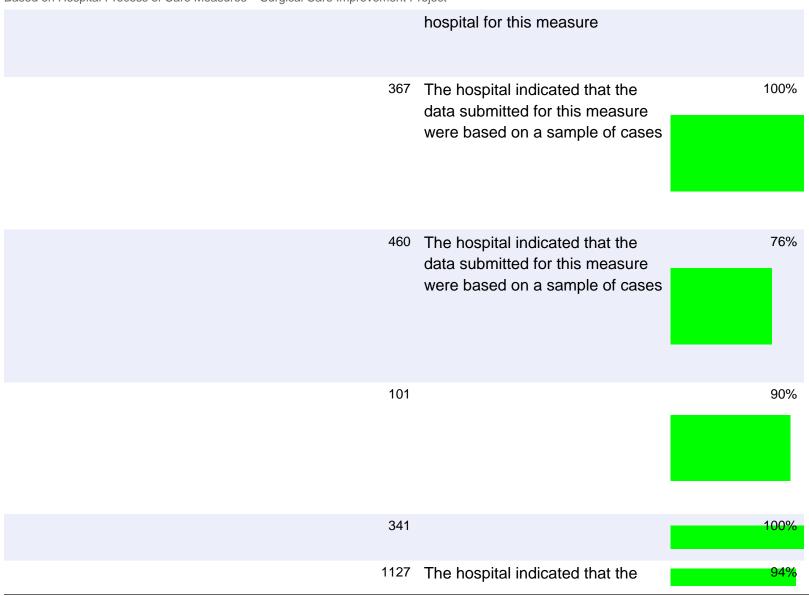
134 The hospital indicated that the

Page 266 of 324 05/31/2011



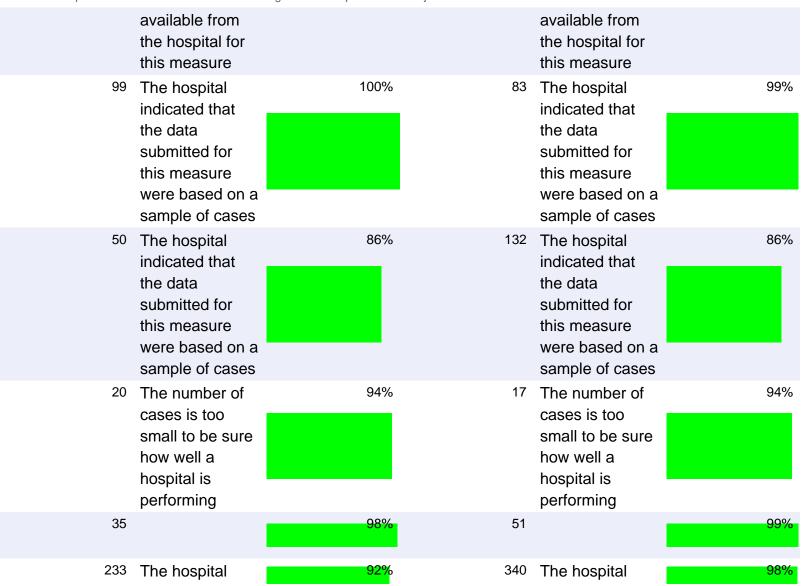
Page 267 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



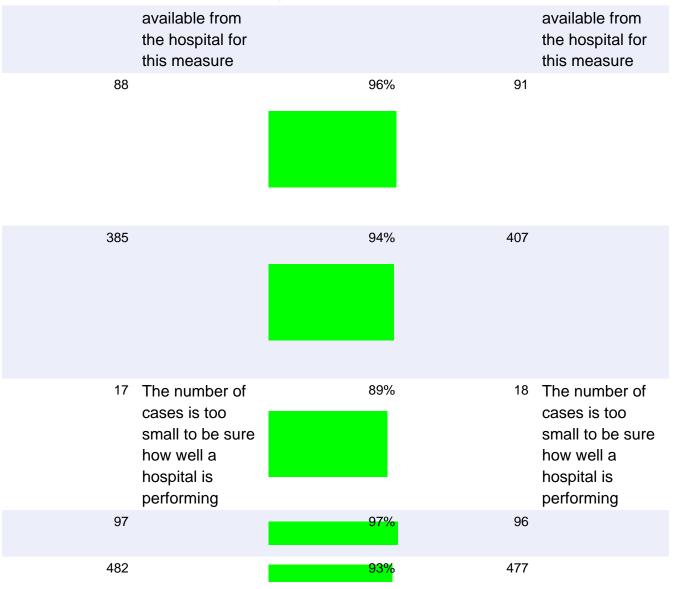
Page 268 of 324 05/31/2011

Based on Hospital Process of Care Measures - Surgical Care Improvement Project



Page 269 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 270 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

250057	KING'S DAUGHTERS MEDICAL CENTER-BROOKHAVEN	P O BOX 948/427 HIGHWAY 51 NORTH
251309	FIELD MEMORIAL COMMUNITY HOSPITAL	270 WEST MAIN STREET P O BOX 639
250097	SOUTHWEST MS REGIONAL MEDICAL CENTER	215 MARION AV BOX 1307
250049	S PIKE HOSP ASSC DBA BEACHAM	205 N CHERRY ST

Page 271 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

BROOKHAVEN LINCOLN

CENTREVILLE WILKINSON

MCCOMB PIKE

MAGNOLIA PIKE

Page 272 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 273 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

data submitted for this measure were based on a sample of cases

123

11 The number of cases is too small to be sure how well a hospital is performing

325 The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 274 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 275 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

data submitted for this measure were based on a sample of cases

121

11 The number of cases is too small to be sure how well a hospital is performing

The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 276 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 277 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

data submitted for this measure were based on a sample of cases

124

11 The number of cases is too small to be sure how well a hospital is performing

The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 278 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 279 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

data submitted for this measure were based on a sample of cases

52

8 The number of cases is too small to be sure how well a hospital is performing

The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 280 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 281 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

data submitted for this measure were based on a sample of cases

53

8 The number of cases is too small to be sure how well a hospital is performing

The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

Page 282 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 283 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

data submitted for this measure were based on a sample of cases

0

0

69 The hospital indicated that the data submitted for this measure were based on a sample of cases

N/A No data is available from the

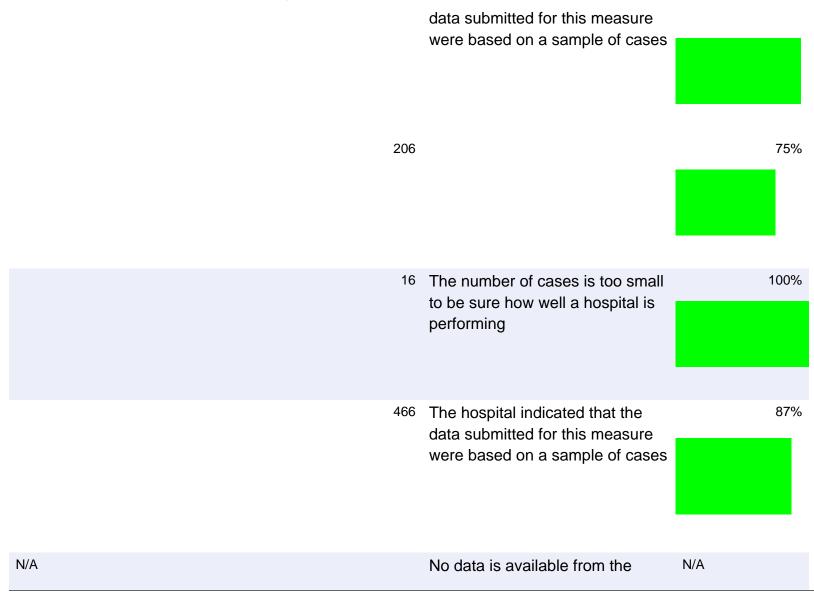
Page 284 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



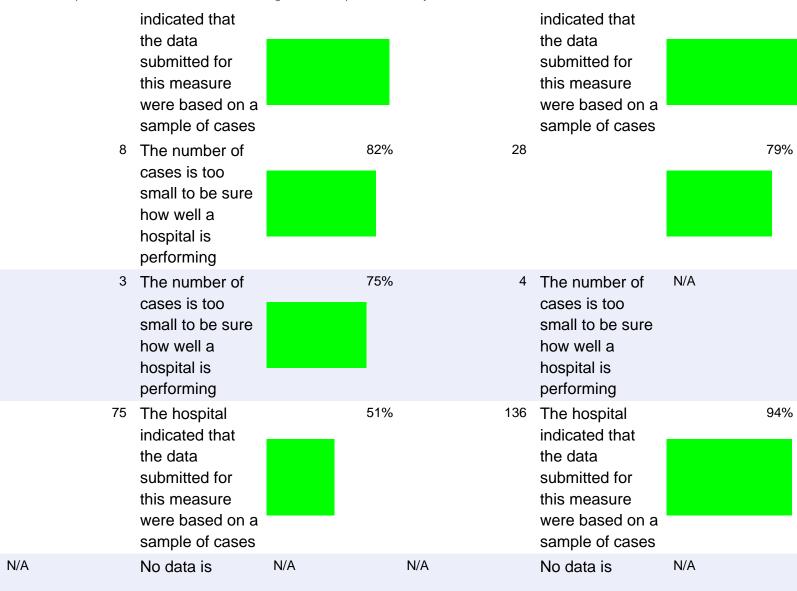
Page 285 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



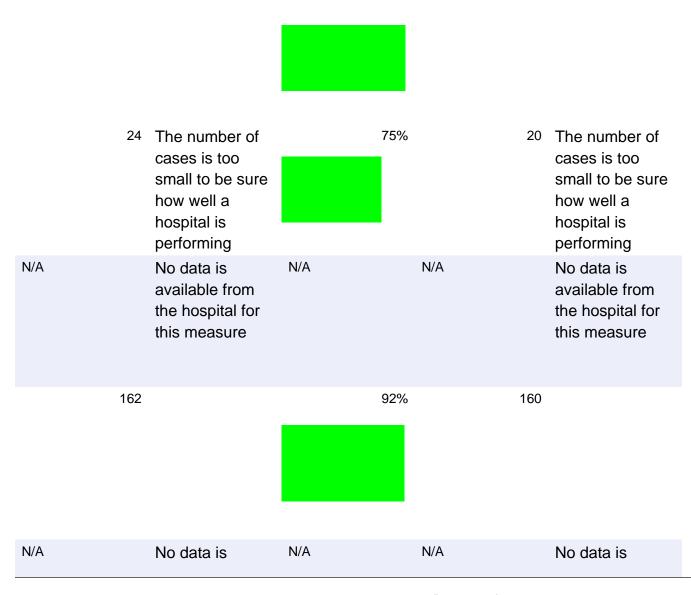
Page 286 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 287 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 288 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

e improvement Project	
MEMORIAL	
WALTHALL COUNTY GENERAL HOSPITAL CAH	100 HOSPITAL DRIVE
BAPTIST MEM HOSP/GOLDEN TRIANGLE INC	2520 5TH ST N
WEBSTER GENERAL HOSPITAL/SWING BED	70 MEDICAL PLAZA
KILMICHAEL HOSPITAL	301 LAMAR AVENUE
OCH REGIONAL MEDICAL CENTER	400 HOSPITAL ROAD
CLAY COUNTY MEDICAL CENTER	835 MEDICAL CENTER DR
	WALTHALL COUNTY GENERAL HOSPITAL CAH BAPTIST MEM HOSP/GOLDEN TRIANGLE INC WEBSTER GENERAL HOSPITAL/SWING BED KILMICHAEL HOSPITAL OCH REGIONAL MEDICAL CENTER

Page 289 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

TYLERTOWN WALTHALL

COLUMBUS LOWNDES

EUPORA WEBSTER

KILMICHAEL MONTGOMERY

STARKVILLE OKTIBBEHA

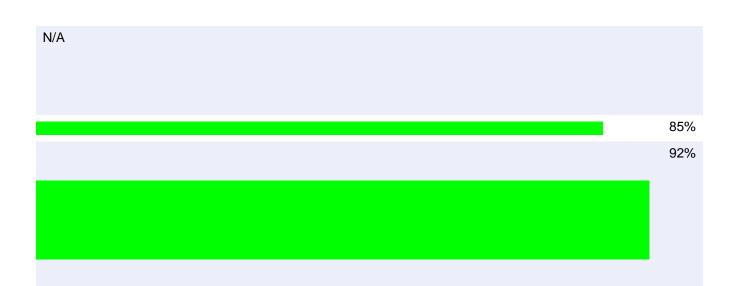
WEST POINT CLAY

Page 290 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A





Page 291 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

		,
		hospital for this measure
N/A		No data is available from the hospital for this measure
	471	
N/A		No data is available from the hospital for this measure
N/A		No data is available from the hospital for this measure
	189	
		The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 292 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A





Page 293 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Bacca cir i loopitar i roccoo ci caro moacarco	ourground and improvement	. 0,000
		hospital for this measure
N/A		No data is available from the hospital for this measure
	461	
N/A		No data is available from the hospital for this measure
N/A		No data is available from the hospital for this measure
	179	
	77	The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 294 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



N/A

96%

89%

Page 295 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

baseu on Hospital Frocess of Gale Measures – Surgical Gale Improve	IICIII I	Toject
		hospital for this measure
N/A		No data is available from the hospital for this measure
	472	
N/A		No data is available from the hospital for this measure
N/A		No data is available from the hospital for this measure
	187	
	79	The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 296 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



N/A



Page 297 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

	hospital for this measure
N/A	No data is available from the hospital for this measure
	350
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
	88
	The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 298 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A



N/A



Page 299 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

	hospital for this measure
N/A	No data is available from the hospital for this measure
	350
N/A	No data is available from the hospital for this measure
N/A	No data is available from the hospital for this measure
	88
	The hospital indicated that the data submitted for this measure were based on a sample of cases

Page 300 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A	
	89%
	09%
N/A	
N/A	
N/A	
N/A	

Page 301 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

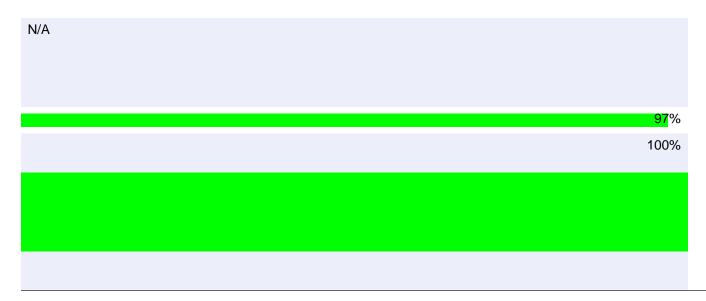
·	,	
	hospital fo	or this measure
N/A		available from the or this measure
		er of cases is too small how well a hospital is
N/A		available from the or this measure
N/A		available from the or this measure
	0	
	data subm	tal indicated that the nitted for this measure ed on a sample of cases

Page 302 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

N/A





Page 303 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 304 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

	angioan oano improvento.				
available from the hospital for this measure			available from the hospital for this measure		
No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A	
)	99%	165		97	%
No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A	
No data is available from the hospital for this measure	N/A	N/A	No data is available from the hospital for this measure	N/A	
3	91%	53		91	<mark>%</mark>
The hospital indicated that the data submitted for this measure were based on a sample of	100%	12	The hospital indicated that the data submitted for this measure were based on a sample of	54	%
	available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure The hospital for this measure The hospital indicated that the data submitted for this measure were based on a	available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure The hospital indicated that the data submitted for this measure were based on a	the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure The hospital indicated that the data submitted for this measure were based on a	available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure The hospital for this measure The hospital indicated that the data submitted for this measure were based on a	available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure No data is available from the hospital for this measure The hospital for this measure The hospital indicated that the data submitted for this measure were based on a

Page 305 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

		oo or ouro mouduros				
		available from the hospital for this measure				available from the hospital for this measure
N/A		No data is available from the hospital for this measure	N/A	N/A		No data is available from the hospital for this measure
	215			93%	210	
N/A		No data is available from the hospital for this measure	N/A	N/A		No data is available from the hospital for this measure
N/A		No data is available from the hospital for this measure	N/A	N/A		No data is available from the hospital for this measure
	85			95%	82	
	95			91%	54	

Page 306 of 324 05/31/2011

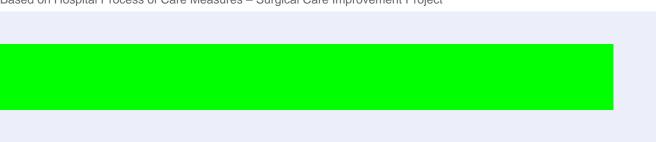
Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 307 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 308 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

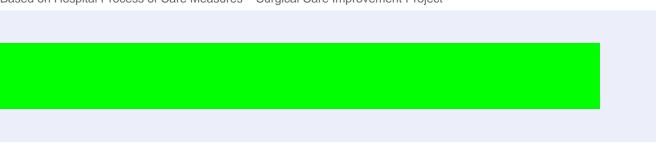


Page 309 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 310 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 311 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 312 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

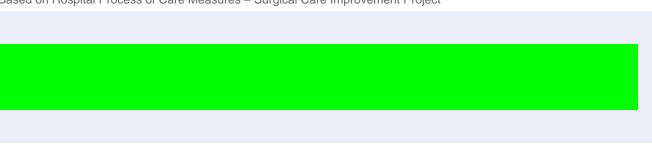


Page 313 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 314 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 315 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 316 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 317 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 318 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 319 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 320 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project

Page 321 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 322 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 323 of 324 05/31/2011

Based on Hospital Process of Care Measures – Surgical Care Improvement Project



Page 324 of 324 05/31/2011